

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Markham et al.

Application No. 09/869,564

Filed: October 10, 2001

Confirmation No. 4375

For: WOUND HEALING AND OROFACIAL  
CLEFTING

Examiner: Joyce Tung

Art Unit: 1637

Attorney Reference No. 5585-59367-01

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP AMENDMENT, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney  
for Applicant(s)

Date Mailed June 8, 2004

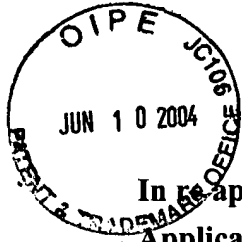
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AMENDMENT

This responds to the Office action dated February 25, 2004. A three-month period for response was set, and a one-month extension fee is enclosed, making a response due by June 25, 2004. Please amend the referenced application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2.

**Remarks** begin on page 5.



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TRANSMITTAL LETTER

Enclosed is an Amendment (with Exhibit A) for the above application. The fee has been calculated as shown below.

CLAIMS AS AMENDED					
For	No. after amendment	No. paid for previously	Present Extra	Rate	Fee
Total Claims	18	- 49*	= 0	\$18.00	\$0.00
Indep. Claims	6	12**	= 0	\$86.00	\$0.00
Mult. Dep. Claims Fee (if not previously paid)				\$290.00	\$0.00
One-month Extension of Time				\$110.00	\$55.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$55.00

\* greater of twenty or number for which fee has been paid.

\*\* greater of three or number for which fee has been paid.


- ☒ Applicants petition for an extension of time for the number of months indicated above. If an additional extension of time is required please consider this a petition therefor.
- ☒ A check in the amount of \$55.00 is attached.
- ☒ Please charge any additional fees that may be required in connection with filing this amendment and any extension of time, or credit any overpayment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.

☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

By

  
Sheree Lynn Rybak, Ph.D.  
Registration No. 47,913

One World Trade Center, Suite 1600  
121 S.W. Salmon Street  
Portland, Oregon 97204  
Telephone: (503) 226-7391  
Facsimile: (503) 228-9446

cc: Docketing